132366

Docket No.:

## DECLARATION UNDER 35 USC §371(c)(4) FOR PCT APPLICATION FOR UNITED STATES PATENT

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below under my name;

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought, namely the invention entitled: DISPLAY CONTROL DEVICE, DISPLAY DEVICE, AND DISPLAY METHOD

described and claimed in international application number PCT/JP2005/021556 filed on November 30, 2005.

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations §1.56.

Under Title 35, U.S. Code §119, the priority benefits of the following U.S. and/or foreign application(s) filed by me or my legal representatives or assigns within one year prior to my international application are hereby claimed:

COUNTRY	APPLICATION NO.	DATE OF FILING	PRIORITY CLAIMED
Japan	JP2004-347328	November 30, 2004	Yes
Japan	JP2005-084317	March 23, 2005	Yes
Japan	Љ2005-257334	September 6, 2005	Yes

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to my international application, or (b) before the filing date of the above-named foreign priority application(s):

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, CUSTOMER NUMBER 25944, TELEPHONE (703) 836-6400.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

T	Typewritten Fi	uli Name			
	of Sole or Firs	t Inventor:	YOSHIKAZU		UETA
			Given Name	Middle Initial	Family Name
2 Inventor's Signature:		nature:	roshikanu		<i>Ueta</i>
3	3 Date of Signature:  Residence: KOBE City		05	07	2007
			Month	Day	Year
			3	JAPAN	JAPAN
				State or Province	Country
	Citizenship:	JAPANESE			
	Post Office Address:		C/O FUJITSU TI	EN LIMITED	
(Insert complete mailing address, including country)		1-2-28 GOSHO-	DORI, HYOGO-KU, KOBE-S	HI, HYOGO, JAPAN 652-8510	

Note to Inventor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE X



## (Discard this page in a sole inventor application)

1	Typewritten Full Name			
	of Joint Inventor:	MITSUHIRO		KAMOTO
2	Inventor's Signature:	Given Name	Middle Initial	Family Name
2 inventor's Signature:		Mitsuhiro		kameto
3	Date of Signature:		θ 7	2007
		Month	Day	Year
	Residence:	КОВЕ	JAPAN	JAPAN
	Citizenship: JAPANES	City E	State or Province	Country
	Post Office Addres	s: С/О FUЛТ	SU TEN LIMITED	
	(Insert complete n address, including	<i>o</i> .	SHO-DORI, HYOGO-KU, KOBE-SHI,	HYOGO, JAPAN 652-8510
1	Typewritten Full Name			
	of Joint Inventor:	HIROYUKI		<b>FUЛМОТО</b>
		Given Name	Middle Initial	Family Name
2	Inventor's Signature:	Hiroyuk	á	Fujimola
3	Date of Signature:	7	07	2007
•	2 440 01 01gaman 01	Month	Dav	Year
	Residence:	KOBE	JAPAN	JAPAN
	Citizenship: JAPANES	City	State or Province	Country
	•			· · · · · · · · · · · · · · · · · · ·
	Post Office Address		SU TEN LIMITED	
	(Insert complete m address, including	·		
	_	1-2-28 GOS	SHO-DORI, HYOGO-KU, KOBE-SHI, I	TYOGO, JAPAN 652-8510
1	Typewritten Full Name			
	of Joint Inventor:	YOSHIYUKI	2.1.1	HASHIMOTO
2	Inventor's Signature:	Given Name	Middle Initial	Family Name
-	mventor s organitie.	YOSHIYU	'kI	HASHI MOTO.
3	Date of Signature:	0.5	o 7	2007
		Month	Day	Year/
	Residence:	KOBE	JAPÁN	JAPAN
	Citizenship: JAPANESE	City	State or Province	Country
	Post Office Address		GU TEN LIMITED	
	(Insert complete m	·		
	àddress, including	· .	HO-DORI, HYOGO-KU, KOBE-SHI, F	IYOGO, JAPAN 652-8510
1	Typewritten Full Name			
	of Joint Inventor:	TAKU		YOKAWA
2	Inventor's Signature:	Given Name	Middle Initial	Family Name
L	mventor s Signature:	TAKU		YOKAWA
3	Date of Signature:	05	07	209
		Month	Day	Year
	Residence:	KOBE	JAPAN	JAPAN
	Citizenship: JAPANESE	City	State or Province	Country
	Post Office Address		U TEN LIMITED	
	(Insert complete ma			
	address, including of	country) 1-2-28 GOSI	HO-DORI, HYOGO-KU, KOBE-SHI, H	YOGO, JAPAN 652-8510

Note to Inventor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney of the application to which it pertains.

1 Typewritten Full Name					
	of Joint Inventor:		MINORU		MAEHATA
	·		Given Name	Middle Initial	Family Name
2 Inventor's Signature:		·e: 	minou		machata
3 Date of Signature:		·	04	25	2007
			Month	Day	Year
	Residence:		OBE	JAPAN	JAPAN
	Citizenship:	City JAPANESE		State or Province	Country
	Post Office Address:		C/O FUJITSU TEN	LIMITED	
(Insert complete mailing address, including country)			1-2-28 GOSHO-DC	ORI, HYOGO-KU, KOBE-SHI, H	YOGO, JAPAN 652-8510
1	Typewritten Full No	ıme			
	of Joint Inventor:		KANAKO		NISHIDA
			Given Name	Middle Initial	Family Name
2			KANAKO		NISHIDA
3	Date of Signature:		04	25	2007
			Month	Day	Year
	Residence:	Residence: KC		JAPAN	JAPAN
	Citizenship:	City JAPANESE		State or Province	Country
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(Insert complete mailing address, including country)		1-2-28 GOSHO-DO	PRI, HYOGO-KU, KOBE-SHI, H	YOGO, JAPAN 652-8510	

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